Effective December 16, 1991										810560					
CLA				LAIMS AS FILED - PART (Column 1)			(Column 2)			SMALL ENTITY		OTHER THAN SMALL ENTITY			
FOR			NUMBER FILED			NUMBER EXTRA			RATE	FEE		RATE	FEE		
BASIC FEE										\$ 345.00	OR		\$ 690.00		
TOTAL CLAIMS			3 minus 20			• •			x \$10-		OR	x \$20 =			
INDEPENDENT CLAIMS			3 minus			•			x 36 =		OR	x 72 =	(
MULTIPLE DEPENDENT CLAIM PRESENT									+ 110 =		OR	+ 220 =			
If the difference in column 1 is less then zero, enter "0" in column 2									TOTAL		OR	TOTAL	90:0		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							;	SMALL I	MILLA	OR	OTHER T				
AMENDMENT A		CLAIN REMAIN AFTE AMENDI	NING R		NU PRE	SHEST MBER /IOUSLY D FOR	PRESENT EXTRA	RATE	RATE -	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total .	*		Minus	**		=		x \$10=		OR OR	x \$20 =			
	Independent	•		Minus	***		=	<u>J</u> L	x 36 =		OR	x 72=			
	FIRST PRESENTATION OF MULTIPLE DE				PENDE	NT CLAIM			+ 110 =		OR	+ 220 =			
(Column 1)					(Col	umn 2)	(Column 3)	ADD	TOTAL IT. FEE		OR	TOTAL DDIT. FEE			
AMENDMENT B		CLAIN REMAIN AFTE AMENDI	NING R		NU PRE\	SHEST MBER MOUSLY D FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	•		Minus	**		=		x \$10 =		OR	x \$20 =			
	Independent	2		Minus .	***				x 36 =		OR OR	x 72 =			
	FIRST PRESENTATION OF MULTIPLE DE				PENDE	NT CLAIM			+ 110 =		OR	+ 220 =			
(Column 1)					(Col	umn 2)	(Column 3)	ADI	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	ŧ		
AMENDMENT C		CLAIM REMAIN AFTEI AMENDM	IING R		NU PREV	HEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE ADDI- TIONAL FEE			RATE	ADDI- TIONAL FEE		
	Total	•		Minus	**				x \$10 =	·	OR	x \$20 =			
	Independent	•	٨	Minus	***		=		x 36 =		OR OR	x 72 =			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+ 110 =		OR	+ 220 =			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". ADDIT. FEE ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".											OR A	TOTAL DDIT. FEE			
Th.	e "Highest Num	per Previor	ому га usiy Paid	d For (Total	or Indep	pendent) is th	e highest numbe	er fou	nd in the a	ppropriate b	ox in a	olumn 1.			

Application or Docket Number